

**Political Organization  
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

**A For the period beginning** 06/01/2013 **and ending** 06/30/2013

**B Check applicable box:** ☒ Initial report ☐ Change of address ☐ Amended report ☐ Final report

**1 Name of organization** Pennsylvania Freedom Fighters **Employer identification number** 27 - 0880979

**2 Mailing address (P.O. box or number, street, and room or suite number)**  
5187 Point View Rd.

**City or town, state, and ZIP code**  
Reynoldsville, PA 15851

**3 E-mail address of organization:** pennsylvaniansforfreedom@verizon.net **4 Date organization was formed:** 09/02/2009

**5a Name of custodian of records** Patricia Fish **5b Custodian's address** 5187 Point View Rd.  
Reynoldsville, PA 15851

**6a Name of contact person** Patricia Fish **6b Contact person's address** 5187 Point View Rd.  
Reynoldsville, PA 15851

**7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number**  
5187 Point View Rd.

**City or town, state, and ZIP code**  
Reynoldsville, PA 15851

**8 Type of report (check only one box)**

- ☐ First quarterly report (due by April 15)  
☐ Second quarterly report (due by July 15)  
☐ Third quarterly report (due by October 15)  
☐ Year-end report (due by January 31)  
☐ Mid-year report (Non-election year only-due by July 31)
- ☒ Monthly report for the month of: June (due by the 20th day following the month shown above, except the December report, which is due by January 31)  
☐ Pre-election report (due by the 12th or 15th day before the election)  
(1) Type of election:  
(2) Date of election:  
(3) For the state of:  
☐ Post-general election report (due by the 30th day after general election)  
(1) Date of election:  
(2) For the state of:

**9 Total amount of reported contributions (total from all attached Schedules A).....9. \$ 160**

**10 Total amount of reported expenditures (total from all attached Schedules B).....10. \$ 110**

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Patty Fish

07/12/2013

**Sign  
Here**



Signature of authorized official



Date

**Schedule A**   **Itemized Contributions**

Schedule A

**Contributor's name, mailing address and ZIP code**aggregate below threshold  
5187 Point View Rd.  
Reynoldsville, PA 15851**Name of contributor's employer**

n/a

**Contributor's occupation**

flea market

**Aggregate contributions year-to-date**

\$ 96

**Amount of contribution**

\$ 40

**Date of contribution**

06/02/2013

**Contributor's name, mailing address and ZIP code**aggregate below threshold  
5187 Point View Rd.  
Reynoldsville, PA 15851**Name of contributor's employer**

n/a

**Contributor's occupation**

hazen mtg

**Aggregate contributions year-to-date**

\$ 820

**Amount of contribution**

\$ 120

**Date of contribution**

06/04/2013

**Schedule B Itemized Expenditures**

Schedule B

**Recipient's name, mailing address and ZIP code**Warsaw Fire Hall  
6847 Rte. 28 N  
Brookville, PA 15825 -**Name of recipient's employer**

n/a

**Recipients's occupation**

n/a

**Amount of Expenditure**

\$ 50

**Date of expenditure**

06/04/2013

**Purpose of expenditure**

rental of fire hall

**Recipient's name, mailing address and ZIP code**aggregate below threshold  
5187 Point View Rd.  
Reynoldsville, PA 15851**Name of recipient's employer**

n/a

**Recipients's occupation**

n/a

**Amount of Expenditure**

\$ 24

**Date of expenditure**

06/10/2013

**Purpose of expenditure**

printed materials

**Recipient's name, mailing address and ZIP code**aggregate below threshold  
5187 Point View Rd.  
Reynoldsville, PA 15851**Name of recipient's employer**

n/a

**Recipients's occupation**

n/a

**Amount of Expenditure**

\$ 36

**Date of expenditure**

06/16/2013

**Purpose of expenditure**

supplies